

Studies on a Potential Ingredient in Herbal Respiratory Infection Treatments: Methanolic Extract of *Angelica Glauca* Root and Stem

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ABSTRACT

It has been discovered that plants manufacture a wide range of substances to defend themselves from a wide range of diseases. This study evaluated the ability of the medicinal plant *Angelica glauca* (Choru) root and stem extracts to fight off respiratory tract pathogens like *Staphylococcus aureus* MTCC 1144, *Streptococcus pneumoniae* MTCC 655, *Streptococcus pyogenes* MTCC 442, *Pseudomonas aeruginosa* MTCC 2474, and *Klebsiella pneumoniae* MTCC 4030. The plant material was gathered in Tungnath, 3,800 meters above sea level, in the Garhwal Himalaya. Plant roots and stems were cleaned, dried in the shade, ground into a fine powder, and then extracted in polarity-varying organic solvents (petroleum ether, chloroform, methanol, and water).

Using the two-fold serial dilution method of MIC determination and agar well diffusion, the antibacterial activity of produced extracts were assessed. Utilizing the DPPH assay, antioxidant potential was calculated, and many phytochemicals underwent qualitative phytochemical investigation. The results of the experiments showed that methanol extract had the highest levels of antibacterial and antioxidant activity, as well as the presence of the greatest number of phytochemical groups. The ZOI's formed by the methanol extract ranged in diameter from 11.0 to 30.3 mm, and the MIC ranges against all of the studied bacteria were 3.12 mg/ml to 25 mg/ml. The extracts of *A. glauca* contained alkaloids, flavonoids, glycosides, tannins, steroids, and saponins. In order to increase the effectiveness of herbal medications against respiratory tract disorders, this study supports the use of *A. glauca* as a natural antioxidant, either in pure form or as a supplement with other herbal formulations already on the market. The usage of *A. glauca* in the current COVID-19 pandemic crisis may be advantageous because its methanolic extract shown positive antibacterial activity against bacterial infections of the human respiratory system.

Key words: *Angelica glauca*, Antibacterial, Two-fold serial dilution, Natural antioxidant, Phytomedicine, Respiratory tract pathogens, DPPH.

I. INTRODUCTION

Since the dawn of human civilization, plant resources have been essential to the growth and maintenance of human life and will continue to be so.

In addition to the three basic necessities of human life—food, clothing, and shelter—the other most significant component of a person's life—their health—also depends heavily on plant resources. Plants are miraculously healing and continue to be a key component of nutraceuticals, Ayurvedic, Unani, homeopathic, herbal, and allopathic treatments. One-fourth of all medications are either derived directly from plants or are plant products. Microbial disease is not an exception to the use of plant-derived therapies in treating a variety of nutrient deficiency-related, physiological, and pathogen-based ailments.^{1,2} Plant-derived extracts and bioactive phytochemicals have reportedly played a significant influence in the creation of novel drugs in recent decades.³ All five components, or "Panchaang" (root, stem, leaves, and flowers), are beneficial medicinally. Alkaloids, tannins, flavonoids, steroids, phenolics, and other secondary metabolites found in plants are essential sources of diverse secondary metabolites with specific bioactive qualities, such as antibacterial activity, which serve as the foundation for the use of plants in pharmaceuticals.⁴⁻⁶ Essential oils are known to include phenolics, which have the potential to be insecticidal substances.^{7,8}

Reactive oxygen species (ROS), such as the superoxide anion, the hydroxyl radical, and hydrogen peroxide, are crucial in the onset of many diseases, including Parkinson's disease, rheumatoid arthritis, asthma,

and bronchitis. Due to the presence of natural antioxidant chemicals that protect cells from the detrimental effects of ROS and reactive nitrogen species (RNS), plants offer a good chance for the treatment of diseases caused by ROS. Clinical evidence indicates that antibiotics are the primary tool against microbial (bacterial and fungal) infections, but antibiotic misuse has led to the issue of multi-drug resistance among different pathogenic microbes, and plants are predicted to provide new therapeutic molecules to combat drug-resistant microbes.

Infections in the respiratory tract are a leading cause of illness and mortality.¹⁰ The greatest public health issues around the world include respiratory disorders such as allergies, asthma, and chronic obstructive pulmonary disease (COPD).

The most recent COVID-19 pandemic is a virus-driven respiratory tract infection.¹¹ The most frequent causal agents of these infections are the microorganisms *Streptococcus pneumoniae*, *Klebsiella pneumoniae*, *Staphylococcus aureus*, *Haemophilus influenzae*, *Pseudomonas aeruginosa*, *Acinetobacter baumannii*, and *Stenotrophomonas maltophilia*. The opportunistic microorganisms utilized in this study—*Streptococcus pyogenes*, *Streptococcus pneumoniae*, *Klebsiella pneumoniae*, *Staphylococcus aureus*, and *Pseudomonas aeruginosa*—cause mild to severe infections. *Streptococcus pneumoniae* (MTCC-655), *Klebsiella pneumoniae* (MTCC-4030), *Staphylococcus aureus* (MTCC 1144)^{16,17}, and *Pseudomonas aeruginosa* (MTCC 2474) are MTCC strains of these diseases. Numerous research teams have employed 14, 18 as pathogens for urine and respiratory tracts in anti-bacterial testing. The family Apiaceae's genus *Angelica* is well known for its applications in both conventional and contemporary medical practices. There are between 110 and 115 different species of *angelica* known to exist, 87 of which are found in Asia.¹⁹ There have been reports of *Angelica glauca* Edgew., *Angelica archangelica* L., and *Angelica nubigena* Cl. in the Indian Himalaya.²⁰ of these were *Angelica glauca* Edgew., also known as Choru in the local dialect. Choru; Sanskrit name- Gandrayan; English name-smooth *Angelica*), is widely distributed in the Himalayan regions of Uttarakhand, Jammu and Kashmir and Himachal Pradesh along amsl of 2000 to 3,800m.²¹.

II. MATERIALS AND METHODS

Plant Material

The healthy plants of *A. glauca* were collected from Uttarakhand. Plant identification was performed by authentication of collected specimens at Glocal University Herbarium (GUH), Root and stem were properly washed under running water, shade dried and grinded together into fine powder for further use.

Preparation of Extract

Four different solvents *i.e.*, Petroleum Ether (PET), Chloroform (CHF), methanol (MeOH) and water, were used for preparation of *A. glauca* extracts. Extracts were prepared by soaking 100g of powdered plant material in 300 ml of each solvent. Soaking plant material along with the solvent, was filled in Soxhlet apparatus and extracted by successive method for 72 h.³⁴ The recovered plant extracts were passed through Whatman No. 1 filter to remove insoluble materials and the filtrate was concentrated using rotary vacuum evaporator to obtain thick gummy extract. For antibacterial assays, the extracts were dissolved in 'dimethyl sulfoxide' (DMSO) to achieve 200mg/ml concentration.

Test Micro-organisms

Staphylococcus aureus (MTCC 1144), *Streptococcus pneumoniae* (MTCC 655), *Streptococcus pyogenes* (MTCC 442), *Pseudomonas aeruginosa* (MTCC 2474), and *Klebsiella pneumoniae* (MTCC 4030) were the bacterial pathogens used in the current investigation. These bacterial strains were bought from the Chandigarh-based Institute of Microbial Technology (CSIR-IMTECH). Chandra et al.³⁵'s normal bacteriological techniques were used to cultivate and maintain the bacterial strains after acquisition.

Inoculum Preparation

Standard cultures were maintained on agar-slant at 4°C. Active experimental cultures were prepared by adding a loopful of bacterial cells from standard cultures to Mueller-Hinton broth (MHB) tubes, followed by incubation at 37°C for 24 hrs.

Antibacterial testing

Antibacterial activity of 'root and stem' extract of different solvents was determined by agar well-diffusion method.³⁴ 100 µl of 12-16 hrs grown cultures of bacteria were mixed with 20 ml of molten Mueller Hinton Agar (MHA) (Medium no. 173, HiMedia Pvt. Ltd., Mumbai, India) and poured into pre-sterilized petri plates. Wells were punched in solidified MHA media using sterile cork borer (6.0 mm diameter) and filled with of 45µl of extracts solutions (dissolved in DMSO having final concentration of 200 mg/ml). Erythromycin, a broad-spectrum antibiotic and pure DMSO were used as positive and negative controls, respectively. Plates were incubated at 37°C for 24 hrs, and the diameter of the clear zone (Zone of Inhibition, ZOI), appearing

around each well was measured. Experiments were performed in triplicates and mean values with \pm SD were recorded. The antibacterial activity was interpreted from the ZOI, measured in nearest millimeter (mm).

Determination of Minimum Inhibitory Concentrations (MICs)

Two-fold serial dilution method was used for determining the minimum inhibitory concentrations (MICs) against selected bacterial species,^{35,36} with slight modifications. Six serial dilutions of each extract (50, 25, 12.5, 6.25, 3.12 and 1.56 mg/ml) were used for MIC determination. Tube containing equal volume of normal saline in place of bacterial inoculum was used as negative control. All tubes were incubated for 24 hrs at 37°C. The lowest concentration of the extract in the tube showing no visible growth (turbidity) was considered as MIC of that extract.

Evaluation of Antioxidant Potential using DPPH method

One ml methanol solution of extract was mixed with 3 ml solution of 2×10^{-4} mol/L ethanolic 2,2-diphenyl-1-picrylhydrazyl (DPPH) solution and final volume was maintained to 10 ml using methanol. The mixture was vigorously shaken, and absorbance was instantly assessed at 517nm. The absorbance decrease was estimated at 15 and 30 min before the absorbance reached a steady state (after almost 30 min). Reduction in colour of DPPH was indication of positive indication of antioxidant activity in plant extracts and degree of colour reduction was directly proportional to antioxidant activity. The sample without plant extract but pure solvent and DPPH was used as blank.⁴⁵

III. RESULTS AND DISCUSSION

Antibacterial activities of *A. glauca* 'root and stem' extracts

The essential oil obtained from different species of *Angelica* had been reported to show potent antibacterial and antifungal activities. Essential oil from *A. archangelica* roots was found effective in controlling the growth of bacteria (*Clostridium difficile*, *Clostridium perfringens*, *Enterococcus faecalis*, *Eubacterium limosum* and *Peptostreptococcus anaerobius*) and fungi (*Fusarium genus*, *Botrytis cinerea*, *Alternaria solani*, and *Candida albicans*).^{29,46} Growth of *S. aureus*, *Staphylococcus chromogenes*, and *Streptococcus uberis* was controlled by essential oil obtained from roots of *A. sinensis* and *A. dahurica*.³⁰ Besides antibacterial activity, the essential oil obtained from roots of *A. archangelica*, *A. pubescentis Maxim* and *A. koreana Maxim*. showed potent antifungal activities.^{47,48}

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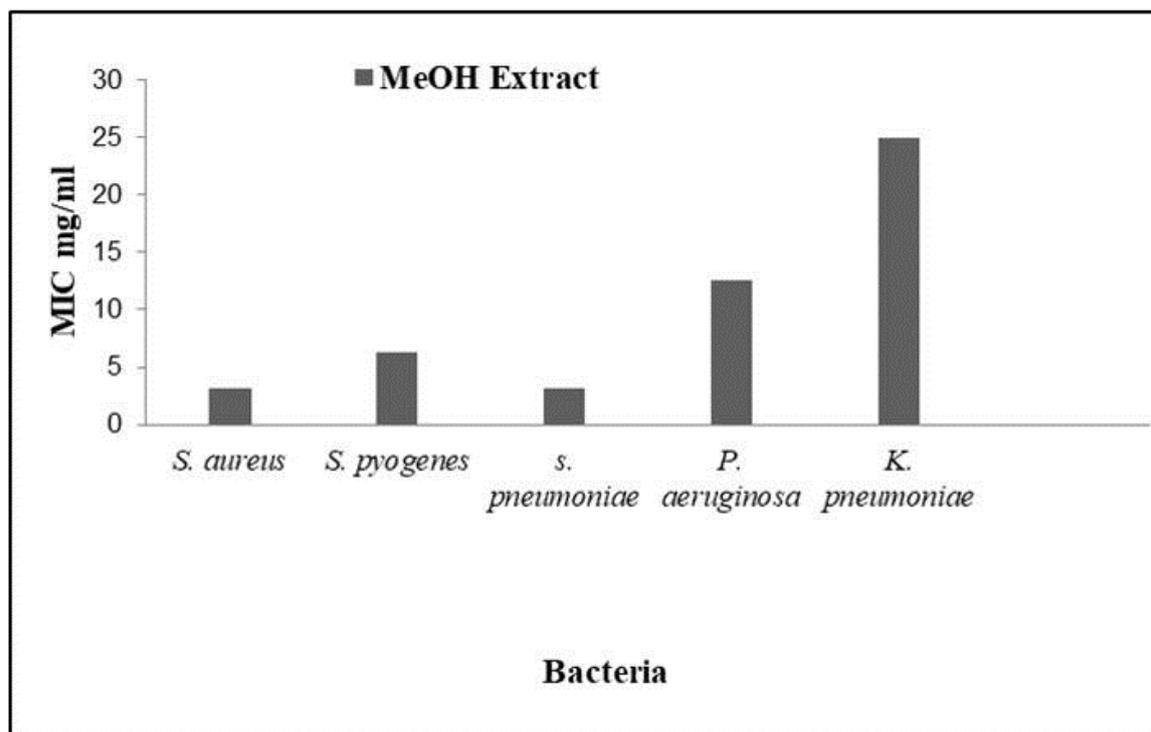


Figure 1: Minimum inhibitory concentrations (MICs) mg/ml of methanol extract of *A. glauca*.

The results of this study corroborated very well with studies by other research groups on *A. glauca* or other species of *Angelica*. The MeOH extract of *A. glauca* (Stem and Root) exhibited 30.3±1.58 mm ZOI against standard strains of *S. aureus* and its MIC was found 3.12 mg/ml. The sensitivity of *S. aureus*, *S. pyogenes*, *P. aeruginosa*, *S. pneumoniae* and *K. pneumoniae* are quite remarkable. The involvement of these micro-organisms in respiratory diseases is fairly notable and well known. *S. pyogenes* colonize the throat or skin and causes pharyngitis, impetigo, rheumatic fever, and acute glomerulonephritis.⁵¹ *S. pneumoniae* causes mild respiratory tract mucosal infections such as otitis media and sinusitis. Sometime it may cause more severe diseases such as pneumonia, septicemia, and meningitis.⁵² *Klebsiella pneumoniae* is an opportunistic pathogen, which mostly affects immune-compromised patients and causes nosocomial urinary tract infections, pneumonia, septicemias, and soft tissue infections. It also causes life-threatening community-acquired infections, such as pyogenic liver abscess, meningitis, fasciitis, endophthalmitis and severe pneumonia.⁵³ *S. aureus* colonizes skin, but sometime causes different pyogenic and systemic infections. Most of *S. aureus* infections are not serious, but sometimes can be serious such as bloodstream infections, pneumonia, or bone and joint infections.⁵⁴ *P. aeruginosa* is a nosocomial pathogen that affects immuno-compromised patients. It causes urinary tract infections, respiratory tract and other soft tissue infections.⁵⁵

Table 1: The diameters of inhibition zones with various extracts of *Angelica glauca*.

Micro-organism	Inhibition zone diameter (mm)				Positive control	Negative Control
	PET	CHF	MeOH	H ₂ O	Erythromycin	DMSO
<i>Staphylococcus aureus</i>	23.6±0.38	24.3±0.25	30.3±1.58	19.3±1.73	30.3±0.87	0
<i>Streptococcus pyogenes</i>	19.0±0.57	16.6±0.76	22.3±0.42	11.0±0.54	24.6±0.76	0
<i>Streptococcus pneumoniae</i>	20.3±0.28	15.6±0.50	21.3±1.28	14.6±0.23	23.0±1.32	0
<i>Pseudomonas aeruginosa</i>	17.3±0.24	19.6±0.56	22.3±0.38	15.6±0.78	24.3±0.51	0
<i>Klebsiella pneumoniae</i>	16.6±0.97	15.6±0.25	19.0±0.54	11.6±0.47	21.6±0.76	0

Antioxidant activity of *A. glauca* root and stem extracts

The results of antioxidant activity assay showed the presence of natural antioxidants in ‘root and stem’ extract of *A. glauca*. At 100µg/ml concentration the MeOH, aqueous, CHF and PET showed 92.5%, 40%, 80% and 30% reduction of DPPH, while at 400µg/ml aqueous extract reduced 95.81% of DPPH (Figure 3 to Figure

6). The potential to scavenge DPPH radical was measured for determining IC₅₀ value which indicate the concentration required to inhibit 50% of DPPH free radicals. Lower values of IC₅₀ indicate higher potency to scavenging DPPH free radicals of plants extract. IC₅₀ value of the MeOH extract (69.42 µg/ml) was much lower in comparison to CHF extract (100.71 µg/ml), PET extract (261.35 µg/ml) and aqueous extract (231.65 µg/ml) of *A. glauca* (Figure 7). In comparison to standard antioxidants like BHA, ascorbic acid and rutin, antioxidant ability of methanolic extract was significantly lower than rutin and ascorbic acid, while it was higher than BHA. IC₅₀ value of MeOH extract (69.42 µg/ml) was half of the BHA (157.63 µg/ml), while it was significantly higher than the IC₅₀s of rutin (45.19 µg/ml) and ascorbic acid (21.43 µg/ml) (Figure 7).

The results showed that highest anti-oxidant potential was present in MeOH extract followed by CHF, aqueous and PET. Phytochemical analysis of the different extracts showed that flavonoids, terpenoids and tannins, which are strong anti-oxidants were present in MeOH extract only. The remaining three extracts were either devoid of (aqueous) or were having only one of these phytochemicals (PET and CHF). Joshi *et al.* 56 reported

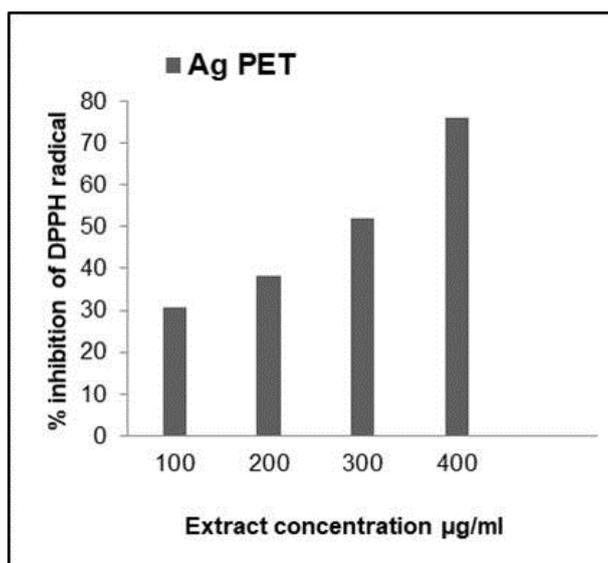


Fig .2 . % Inhibition of DPPH free radicals by *A. glauca* petroleum ether extract (Ag PET).

antioxidant activity of water extract of *A. glauca*, the scavenging activity of the water extract ranged from 14.58% to 71.53% when amount of extract increased from 5 to 25 mg, which was much lower compared to the antioxidant activities of aqueous extract of *A. glauca* reported by us. In present study 100 to 400 µg of extract showed 50.94% to 69.36% inhibition of DPPH, this could be due to different in extract preparation methods, in which we don't dried the extract at 50°C under vacuum, which may cause degradation of phytochemicals. Irshad *et al.* 26 reported that the essential oil of *A. glauca* exhibited good DPPH radical scavenging activity showing (93.4% of inhibition and 45.05% inhibition of peroxidation). In present study the PET extract also showed similar range of antioxidant activity.

IV. CONCLUSION

In this study, methanol extract of root and stem of *A. glauca* have demonstrated strong antibacterial activity against the selected pathogenic bacteria of respiratory tract which may be due to the presence of major phytochemicals present in it. Furthermore, the results suggest a strong likelihood of developing safe effective and cheap antibacterial agent from various parts of *A. glauca*. The methanolic fraction of *A. glauca* can also be used as a new source of natural strong antioxidants. The future aspects of this study include isolating and identifying pure active compounds which are responsible for antibacterial action. The conclusion specifies that scientific studies performed on medicinal plants that have conventional efficacy may warrant fruitful results. Root and stem of *A. glauca* could be powerful source of novel antibiotics and major antioxidant compounds.

ABBREVIATIONS

#: Percentage; µg: Microgram; ml: Millilitre; µl: Microliter; mm: Millimetre; mg: Milligram; g: Gram; °C: Degree Celsius; hrs: Hours; PET: Petroleum Ether; CHF: Chloroform; MIC: Minimum Inhibitory Concentration; MeOH: Methanol; DMSO: Dimethyl Sulphoxide.

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